U. S. DEPARTMENT OF LABOR

Employees' Compensation Appeals Board

In the Matter of JOSEPH B. SCHUMACHER <u>and</u> DEPARTMENT OF THE INTERIOR, BUREAU OF INDIAN AFFAIRS, Flandreau, SD

Docket No. 02-1767; Submitted on the Record; Issued November 26, 2002

DECISION and **ORDER**

Before ALEC J. KOROMILAS, COLLEEN DUFFY KIKO, DAVID S. GERSON

The issue is whether appellant established that his back condition was causally related to his federal employment.

On November 26, 2001 appellant, than a 49-year-old maintenance specialist/electrician, filed a traumatic injury claim alleging that on November 26, 2001 his lower back started aching about an hour after he slipped on ice while loading a bag of salt.

A magnetic resonance imaging (MRI) scan of appellant's left knee dated January 14, 2002 showed that appellant had periarticular soft tissue edema and swelling with the possibility of hematoma, early osteoarthritic changes and superficial and deep venous varicosities.

In a surgeon's preliminary report form dated December 13, 2001, appellant's treating physician, Dr. Bernard F. Heilman, a Board-certified family practitioner, diagnosed L5 radiculopathy and stated that the accident occurred a year ago "[illegible word] at work -- repetitive motions." He stated "yes" to the question that appellant's symptoms were due to the injury. On a surgeon's preliminary report form dated December 24, 2001, Dr. Heilman stated that appellant had low back syndrome with left leg radiculopathy and the condition resulted from work activities. In answer to the question, "Are symptoms due to injury?" he answered "probable." Dr. Heilman prescribed light duty.

By letter dated March 11, 2002, the Office of Workers' Compensation Programs requested that appellant submit additional information including a narrative report from his treating physician on the history of his injury, examination findings, test results, a diagnosis and an opinion on the relationship of the diagnosed condition to his federal employment activity.

Appellant submitted a statement explaining his injury in more detail, that the bag of salt he lifted weighed 50 pounds, he knew he jarred or strained his back with the load of salt and he did not know if he injured his back or aggravated an existing injury by doing heavy lifting.

By decision dated April 25, 2002, the Office denied appellant's claim, stating that he did not meet the requirements for establishing an injury as alleged.

The Board finds that appellant failed to establish that his back condition was causally related to his federal employment.

An employee seeking benefits under the Federal Employees' Compensation Act has the burden of establishing the essential elements of his or her claim including the fact that the individual is an "employee of the United States" within the meaning of the Act, that the claim was filed within the applicable time limitation of the Act, that an injury was sustained in the performance of duty as alleged and that any disability and/or specific condition for which compensation is claimed are causally related to the employment injury. These are the essential elements of each and every compensation claim regardless of whether the claim is predicated upon a traumatic injury or occupational disease.

The medical evidence required to establish a causal relationship, generally, is rationalized medical evidence. Rationalized medical evidence is medical evidence which includes a physician's rationalized medical opinion on the issue of whether there is a causal relationship between the claimant's diagnosed condition and the implicated employment factors. The opinion of the physician must be based on a complete factual and medical background of the claimant, must be one of reasonable medical certainty and must be supported by medical rationale explaining the nature of the relationship between the diagnosed condition and the specific employment factors identified by the claimant.³

In this case, only the reports of appellant's treating physician, Dr. Heilman, dated December 13 and December 24, 2001, address whether appellant's opinion is work related. Neither report, however, described a history of an injury in any detail, described a physical examination or described test results. Further, neither report contains a rationalized medical opinion explaining how appellant's low back syndrome or L5 radiculopathy is related to his federal employment. In his December 24, 2001 report, Dr. Heilman stated that it was "probable" that appellant's symptoms were work related which renders his opinion speculative. Because Dr. Heilman's reports lack a complete evaluation of appellant's condition and do not contain a well-rationalized medical opinion on causation, they are of diminished probative value.⁴

¹ Elaine Pendleton, 40 ECAB 1143, 1145 (1989).

² Daniel J. Overfield, 42 ECAB 718, 721 (1991).

³ Ern Reynolds, 45 ECAB 690, 695 (1994); Gary L. Fowler, 45 ECAB 365, 371 (1994).

⁴ See Thomas A. Faber, 50 ECAB 566, 569-70 (1999); Anna C. Leanza, 48 ECAB 115, 125 (1996); Lee R. Harwood, 48 ECAB 145, 147 (1996).

Although the Office advised appellant of the evidence necessary to establish his claim, appellant did not submit the requisite evidence. He, therefore, has failed to establish that his back condition is work related.⁵

The April 25, 2002 decision of the Office of Workers' Compensation Programs is hereby affirmed.

Dated, Washington, DC November 26, 2002

> Alec J. Koromilas Member

Colleen Duffy Kiko Member

David S. Gerson Alternate Member

⁵ The record includes a report of an MRI scan for someone other than appellant. Appellant notes, in his appeal, that he is concerned that the reports of his maybe in another person's records. The Board notes that it can only rule on the record before it. Should appellant choose to resubmit medical evidence that he believes may not be in the record, he may do so through a request for reconsideration to the Office.